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CONFIRMATION NO. 9038

<b>SERIAL NUMBER</b> 10/533,394	<b>FILING OR 371(c) DATE</b> 11/23/2005 <b>RULE</b>	<b>CLASS</b> 351	<b>GROUP ART UNIT</b> 3735	<b>ATTORNEY DOCKET NO.</b> GK-ZEI-3277/500343.20297
<b>APPLICANTS</b> Oliver Baumann, Aalen, GERMANY; Michael Claus, Aalen, GERMANY; Axel Doering, Jena, GERMANY; Ingo Koschmieder, Jena, GERMANY; Thomas Schulze, Oberkochen, GERMANY; Bernd Spruck, Moegglingen, GERMANY;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP03/11925 10/28/2003 <i>LNL</i>				
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 102 50 569.1 10/28/2002 <i>LNL</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/12/2006</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>Wey</i> <i>LNL</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 12
<b>INDEPENDENT CLAIMS</b> 4				
<b>ADDRESS</b> 26418				
<b>TITLE</b> Ophthalmologic apparatus and related positioning method				
<b>FILING FEE RECEIVED</b> 1230	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	